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Fill in this information to identify your case:	
United States Bankruptcy Court for the:  Northern District of: Illinois	
(State)  Case number (if known)	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yoursel	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Timika	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's license or passport	Pipes Last name	Last name
Bring your picture		
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you	Timika	
have used in the last 8 years	First name	First name
-	Middle name	Middle name
Include your married or maiden names.	Pipes-Leonard Last name	Last name
	Lastriane	Lastriane
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX2783	xxx - xx
Security number or federal Individual	OR	OR
Taxpayer Identification numbe	9 xx - xx-	9 xx - xx-
(ITIN)		

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D	ebtor 1 Timika First Name	Pipes  Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		8926 S. Marshfield  Number Street	Number Street
		Chicago Illinois 60620 City State Zip Code	City State Zip Code
		City State Zip Code  Cook	City State Zip Code
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Deb	otor 1 Timika			Case number (if kno	wn)
	First Name	Middle Name	Last Name		
Par	t 2: Tell the Court Abo	out Your Bankruptcy Case			
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief descrip Bankruptcy (Form B2010)). Als  Chapter 7  Chapter 11  Chapter 12  Chapter 13			c. § 342(b) for Individuals Filing for opriate box.
	How you will pay the fee	more details about how y cashier's check, or mone may pay with a credit car.  I need to pay the fee in individuals to Pay Your F.  I request that my fee be judge may, but is not required the official poverty line the	you may pay. Typically, if you you may pay. Typically, if you you or check with a pre-printer installments. If you choose Filing Fee in Installments (Or waived (You may request quired to, waive your fee, and applies to your family sizyou must fill out the Application.	ou are paying the submitting your ed address. this option, sign fficial Form 103, this option only d may do so only ze and you are u	the clerk's office in your local court for efee yourself, you may pay with cash, repayment on your behalf, your attorney on and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of anable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
	Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor District Debtor District	When When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
	Do you rent your residence?	✓ No. Go to line 12  ✓ Yes. Fill out <i>Initia</i>	2.		you want to stay in your residence?  St You (Form 101A) and file it with

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**Pipes** Debtor 1 Timika \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Timika
 Pipes
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Timika	Middle Nesse	Pipes	Case number (if known	)	
Part 6: Answer These Que	Middle Name estions for Reporting Purp	Last Name			
16. What kind of debts do you have?	16a. Are your debts prim "incurred by an indiv No. Go to line 16 Yes. Go to line 17 16b. Are your debts prim	parily consumer debts? of idual primarily for a person to be a per	onal, family, or househ dusiness debts are debt gh the operation of the	ts that you incurred to obtain business or investment.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Ch	r Chapter 7. Go to line 18. napter 7. Do you estimate th that funds will be available		perty is excluded and administrative ed creditors?	
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,0 ☐ 5,001-10, ☐ 10,001-2	,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000	
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,0 \$50,000,0	01-\$10 million 001-\$50 million 001-\$100 million 0,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,0 \$50,000,0	01-\$10 million 001-\$50 million 001-\$100 million 0,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Part 7: Sign Below					
I have examined this petition, and I declare under penalty of perjury that the information provided is true an correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fix out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed who is not an attorney to help me fill S.C. § 342(b).	
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Timika Pipes		🗶		
	Signature of Debtor 1		Signature of [	Debtor 2	
	Executed on 10/3/2	2017 M / DD / YYYY	Executed o	n	

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Debtor 1 Timika		Pipes	Case number (ii	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	ler Chapter 7, 11, 12	, or 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. § 3	342(b) and, in a case in	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the i	nformation in the sched	dules filed with the petition is incorrect.
attorney, you do not		. ,		·
need to file this page.	/s/ Amy Gerstein		Date	10/3/2017
	Signature of Attorney for	or Debtor		MM / DD / YYYY
	,			
	Amy Gerstein			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	201111001			
	Chicago		Illinois	60603
	City		State	Zip Code
	-			·
	Contact phone	3128374023	Email address	agerstein@semradlaw.com
			•	
			Illinois	8
	Bar number		State	

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Fill in this information to identify your case:					
Debtor 1	Timika		Pipes		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	sankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(State)		

	Check if	this	is	an
_	amende	d filir	ng	

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$142,502.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$11,170.00
1c. Copy line 63, Total of all property on Schedule A/B	\$153,672.00
Part 2: Summarize Your Liabilities	_
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$182,117.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$50,862.00
Your total liabilities	\$232,979.00
Part 3: Summarize Your Income and Expenses	
	\$4,375.32
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	

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Deb	tor 1 <u>T</u>			Pipes	Case number (if known)		
Dout		First Name	Middle Name	Last Name	oordo		
Part	4H A	Answer These Question	s for Administrative	e and Statistical Rec	cords		
6. <b>A</b>	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?						
	No.	. You have nothing to report	on this part of the form	n. Check this box and sul	bmit this form to the court with your other sche	edules.	
Ŀ	✓ Yes	S.					
7 VA	7. What kind of debt do you have?						
[ [	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
	8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$2,668.45					\$2,668.45	
9.	Сору	the following special cate	gories of claims from	Part 4, line 6 of Sched	ule E/F:		
	From Part 4 on Schedule E/F, copy the following:			Total claim			
	9a. Do	omestic support obligations	(Copy line 6a.)		\$0.00		
	9b. Ta	axes and certain other debts	you owe the governme	ent. (Copy line 6b.)	\$0.00		
	9c. Cl	laims for death or personal in	njury while you were into	oxicated. (Copy line 6c.)	\$0.00		
	9d. St	tudent loans. (Copy line 6f.)			\$34,317.00		
		bligations arising out of a se by claims. (Copy line 6g.)	paration agreement or o	divorce that you did not re	eport as \$0.00		
	9f. De	ebts to pension or profit-shar	ring plans, and other sir	milar debts. (Copy line 6h	\$0.00		

\$34,317.00

9g. Total. Add lines 9a through 9f.

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Fill in this	s information to identify your case:		
Debtor 1	Timika	Pipes	
Debtor 2	First Name Middle N	Name Last Name	
(Spouse, if	filing) First Name Middle N	Name Last Name	
United St	ates Bankruptcy Court for the: Northern	District of Illinois	
Case nur	mber	(State)	
	al Form 106A/D		Check if this is an
	al Form 106A/B		amended filing
<u>Sche</u>	dule A/B: Property		12/1
category responsib	where you think it fits best. Be as complete a ole for supplying correct information. If more s r name and case number (if known). Answer	ist an asset only once. If an asset fits in more the and accurate as possible. If two married people a space is needed, attach a separate sheet to this every question. nd, or Other Real Estate You Own or Have	re filing together, both are equally form. On the top of any additional pages,
1. Do yo	u own or have any legal or equitable interest  No. Go to Part 2	in any residence, building, land, or similar prope	rty?
	Yes. Where is the property?		
1.1	Street address, if available, or other description	What is the property? Check all that apply.  Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	8926 S. Marshfield	Duplex or multi-unit building	Current value of the Current value of the
	Number Street	Condominium or cooperative  Manufactured or mobile home	entire property? portion you own? \$142502.00 \$142502.00
	Chicago Illinois 60620 City State Zip Code	Land	Describe the nature of your ownership
	•	Investment property Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by
	Cook County	Other	the entireties, or a life estate), if known.
		Who has an interest in the property? Check one.	Check if this is community property (see instructions)
		Debtor 1 only	
		Debtor 2 only	
		Debtor 1 and Debtor 2 only	
		At least one of the debtors and another  Other information you wish to add about this i	tem such as local
		property identification 25-06-216-023-	•
If you	own or have more than one, list here:		
1.2	Street address, if available, or other description	What is the property? Check all that apply.  Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> <i>Creditors Who Have Claims Secured by Property.</i>
	, , , ,	Duplex or multi-unit building  Condominium or cooperative	Current value of the Current value of the
		Manufactured or mobile home	entire property? portion you own?
	Number Street	Investment property	Describe the nature of your ownership
	City State Zip Code	Timeshare Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	ony ondo Ep codo	Who has an interest in the property? Check one.	Check if this is community property (see instructions)
		Debtor 1 only	
		Debtor 2 only	
		Debtor 1 and Debtor 2 only	
		At least one of the debtors and another	
		Other information you wish to add about this i	tem, such as local

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Debtor 1	Timika		Pipes Case numb	er (if known)	
	First Name	Middle Name	Last Name		
1.3	et address, if available, or o	ther description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
	nber Street		Land Investment property Timeshare	Describe the nature or interest (such as fee s the entireties, or a life	imple, tenancy by
City	State	Zip Code	Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another	Check if this is co (see instructions)	
			Other information you wish to add about this item property identification number:	, such as local	
you ha	the dollar value of the pove attached for Part 1. W	rite that number	r all of your entries from Part 1, including any entri here. ▶	es for pages \$14	2502.00
ou own t	hat someone else drives. If ins, trucks, tractors, sport u	you lease a vehicle	st in any vehicles, whether they are registered or re, also report it on Schedule G: Executory Contracts and proycles		
3.1	Make Model: Year:	Chevrolet Cruz 2011	Who has an interest in the property? Check one.  Debtor 1 only	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage:  Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$0.00	Current value of the portion you own?
2.0	Make	Chevrolet	Check if this is community property (see instructions)  Who has an interest in the property? Check	Do not doduct accurad	claims or exemptions. Put
3.2	Model: Year:	Tahoe 2007	one.  Debtor 1 only	the amount of any secu	red claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information:	150000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$9125.00	Current value of the portion you own? \$9125.00
			Check if this is community property (see instructions)		

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	Timika First Name	Middle Name	Pipes  Last Name	_ Case number	(if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the prope one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions)	another	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D</i> <i>nims Secured by Property.</i> Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the prope one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community properties.	another	the amount of any secu	claims or exemptions. Put ared claims on Schedule D hims Secured by Property. Current value of the portion you own?
		•	recreational vehicles, other vehicles of the recreation of the rec	•	es	
				erty? Check		claims or exemptions. Pu
	Make Model: Year: Approximate mileage: Other information:		one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and  Check if this is community pr	another	the amount of any secu	claims or exemptions. Pured claims on Schedule Edims Secured by Property.  Current value of the portion you own?
4.2	Model: Year: Approximate mileage:		one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	another roperty (see erty? Check	the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu	red claims on Schedule Lims Secured by Property.  Current value of the

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De	ebtor 1	Timika		Pipes	Case number (if known)	
		First Name	Middle Name	Last Name		
Pa	ırt 3:	Describe Y	our Personal and Household Items	}		
D	o you	own or hav	ve any legal or equitable interest in a	any of the follov	ving items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		_	and furnishings bliances, furniture, linens, china, kitchenware	)		
V	Yes. [	Describe	Misc. Household Furniture & Goods			\$700.00
		tronics bles: Television	s and radios; audio, video, stereo, and digita	al equipment; com	puters, printers, scanners; music	
<b>✓</b>	Yes. [	Describe	Misc. Electronics			\$200.00
		•	lue and figurines; paintings, prints, or other artw pin, or baseball card collections; other collect		• •	
✓	No					
	Yes. [	Describe				
		les: Sports, pl	orts and hobbies notographic, exercise, and other hobby equi ks; carpentry tools; musical instruments	ipment; bicycles, po	pol tables, golf clubs, skis; canoes	
V	No					
Ī	Yes. [	Describe				
	<b>0. Fire</b> Examp		les, shotguns, ammunition, and related equ	ipment		
<b>V</b>	No					
	Yes. [	Describe				
			clothes, furs, leather coats, designer wear, s	shoes, accessories		
Щ	No	D				
✓	Yes. I	Describe	Used Clothing			\$250.00
	2. Jev Examp	•	jewelry, costume jewelry, engagement rings, er	, wedding rings, he	eirloom jewelry, watches, gems,	
<u>✓</u>		Describe	Misc. Jewelry			\$15.00
	Examp	n-farm anima bles: Dogs, cat	Is s, birds, horses			
	No Yes. [	Describe				
<u>ا</u>	1  4 Am	other perce	nal and household items you did not alre	adv list including	any health aids you did not list	
	_	other herson	iai ana nousenoia items you did not dire	aay nat, menuding	, any nearth alas you did not list	
뇓	No No	]				
Ш	ı	Describe				
			alue of all of your entries from Part 3, inc t number here			\$1165.00

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Deb	tor 1 <u>Timika</u>		Pipes	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Describe Your F	inancial Assets			
Do	you own or have any	/ legal or equitable interest	in any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Cash Examples: Money you hav	ve in your wallet, in your home, in	a safe deposit box, and on h	nand when you file your petition	
	✓ Yes			Cash:	\$5.00
17.	Examples: Checking, sa and other similar in:	wings, or other financial accounts; stitutions. If you have multiple acc	· ·	s in credit unions, brokerage houses, on, list each.	
	☐ No ✓ Yes		Institution name:		
		17.1. Checking account:	CitiBank		\$522.00
		17.2. Checking account:	Chicago Post Office Emplo	yees Credit Union	\$0.00
		17.3. Checking account:	PNC Bank		\$15.00
		17.4. Checking account:	PNC Bank		\$100.00
		17.5. Checking account:	PNC Bank		\$225.00
		17.6. Savings account:	CitiBank		\$3.00
		17.7. Savings account:	Chicago Post Office Emplo	yees Credit Union	\$0.00
		17.8. Savings account:	PNC Bank		\$10.00
		17.9. Savings account:	PNC Bank		\$0.00
		17.10. Savings account:	PNC Bank		\$0.00
		17.11. Certificates of deposit:			· · · · · · · · · · · · · · · · · · ·
		17.12. Other financial account:	-		-
		17.13. Other financial account:			
		17.14. Other financial account:			
		17.15. Other financial account:			
18.	Examples: Bond funds,	or publicly traded stocks investment accounts with brokera	age firms, money market acc	ounts	
	✓ No  Yes	Institution or issuer name:			
10	No LP		ada ada atau at a ta	atana and atana at a san at a	
19.	an LLC, partnership, a		ed and unincorporated bu	sinesses, including an interest in	
	<b>✓</b> No	Name of outile.		0/ of own ambigu	
	Yes. Give specific information about	Name of entity		% of ownership:	
	them				
				·	

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Deb	tor 1 limika		Pipes	Case number (if known)	
20.	First Name  Government and corp	Middle Name orate bonds and other negotia	Last Name ble and non-negotiable	e instruments	
	Negotiable instruments	include personal checks, cashiers ents are those you cannot transfe	checks, promissory no	otes, and money orders.	
	Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension Examples: Interests in IF		), thrift savings account	s, or other pension or profit-sharing plans	
	No No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, publi			
	<b>✓</b> No		Institution name:		
	Yes	Electric:		_	
		Gas:			
		Heating oil:	-		
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
23	Annuities (A contract fo	Other: or a periodic payment of money to	a you either for life or fo	ar a number of veers)	
23.	No	or a periodic payment of money to	you, entre for the or it	in a number of years)	
	Yes	Issuer name and description:			
					-

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Debt	or 1 Timika	Pipes Case number (if known)	
24.	First Name Interests in a	Middle Name Last Name  an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition pr	ogram.
		530(b)(1), 529A(b), and 529(b)(1).	·
	✓ No  Yes	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
			·
25.		table or future interests in property (other than anything listed in line 1), and rights or powers for your benefit	
	<b>✓</b> No		
	Yes. Desc	cribe	
26.		pyrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements	
	<b>✓</b> No		
	Yes. Desc	cribe	
27.		anchises, and other general intangibles uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	No No		
	Yes. Desc	cribe	
Mor	ney or prope	erty owed to you?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or prope		portion you own? Do not deduct secured
	Tax refunds o	owed to you	portion you own?  Do not deduct secured claims or exemptions.
	Tax refunds of No Yes. Give:		portion you own? Do not deduct secured
	Tax refunds or  No Yes. Give about your	specific information Federal:	portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds or  No Yes. Give about you and the	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds or  No Yes. Give about your and the	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give about your and the	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give about your and the support of the sup	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give about your and the support of the sup	specific information ut them, including whether already filed the returns the tax years  Local:  brt st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property set	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give about your and the support of the sup	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  tlement
28.	Tax refunds or  No Yes. Give about your and the support of the sup	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give about your and the support of the sup	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give about you and a second	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give about you and	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give about you and	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give about you and	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Debt	or 1 Timika		Pipes	Case number (if known)	
	First Name	Middle Nam	e Last Name		
31.	Interests in insurance Examples: Health, disab		ealth savings account (HSA); credit, I	nomeowner's, or renter's insurance	
	No Yes. Name the insure of each policy and		Company name:	Beneficiary:	Surrender or refund value:
32.	If you are the beneficiar property because some	y of a living trust, expec	n someone who has died t proceeds from a life insurance polic	ey, or are currently entitled to receive	
33.			you have filed a lawsuit or made surance claims, or rights to sue	a demand for payment	
34.	Other contingent and to set off claims  No Yes. Describe	unliquidated claims o	f every nature, including counter	claims of the debtor and rights	
35.	Any financial assets y  No Yes. Describe	ou did not already list			
36.		-	om Part 4, including any entries fo		\$880.00
Part			-	nterest In. List any real estate in F	<sup>p</sup> art 1.
37.	Do you own or have a	ny legal or equitable i	nterest in any business-related pi	operty?	
	No. Go to Part 6. Yes. Go to line 38.				Current value of the portion you own?  Do not deduct secured claims or exemptions
38.	Accounts receivable	or commissions you al	ready earned		
	No Yes. Describe	-			
39.			re, modems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, e	electronic devices
	Yes. Describe				

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Deb	tor 1 Timika	Pipes	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, equ	ipment, supplies you use in business, and tools of your trade	ı	
	<b>✓</b> No			
	Yes. Describe			
	1			
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
	_			
12	Interests in partnerships	or joint ventures		
42.		of joint ventures		
	✓ No	Name of entity:	% of ownership:	
	Yes. Give specific	reality.	, or own ording.	
	information about them			
	urom			
12	Customer lists, mailing lis	ets or other compilations	<del></del>	
45.		is, or other compliations		
	✓ No			
	Yes. Do your lists incli	ude personally identifiable information (as defined in 11 U.S.C. § 1	101(41A))?	
	☐ No			
	Yes. Describe	a		
44.	Any business-related pro	operty you did not already list		
	<b>√</b> No			
	Yes. Give specific			
	information			<u> </u>
		-		
				<u> </u>
		-		<del>_</del>
		-		<del>-</del>
		of your entries from Part 5, including any entries for pages your entries for pages your entries for pages your		
•				
Part	6: Describe Any Farr	m- and Commercial Fishing-Related Property You O	wn or Have an Interest In.	
	If you own or have an int	terest in farmland, list it in Part 1.		
46.	Do you own or have any	legal or equitable interest in any farm- or commercial fishin	ig-related property?	
	No. Go to Part 7.			Current value of the
	Yes. Go to line 47.			portion you own? Do not deduct secured claims
				or exemptions
47.	Farm animals			
	Examples: Livestock, poul	try, farm-raised fish		
	No			
	Yes. Describe			

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Debt	or 1 Timika First Name		ipes ast Name	Case number (if known)	
48.	Crops-either growing of		ast ivalile		
	No No				
	Yes. Describe				
	_				
49.	Farm and fishing equip	ment, implements, machinery, fixture	es, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and commer	cial fishing-related property you did r	not already list		
	<b>✓</b> No				
	Yes. Describe				
52. A	dd the dollar value of all	l of your entries from Part 6, including	anv entries for pages v	you have attached	
		here			
				_	
Part 7	7: Describe All Pro	perty You Own or Have an Intere	st in That You Did No	ot List Above	
53.		perty of any kind you did not already li s, country club membership	st?		
	✓ No	, country olds monisoromp			
	Yes. Give specific				
	information				
- 4 4	4446 - 4546 - 54 - 56 - 6	Laft and a state from Boat 7 Williams	d		
54. A	dd the dollar value of all	of your entries from Part 7. Write tha	it number nere		
Part 8	List the Totals of	Each Part of this Form			
55 <b>C</b>	Part 1. Total real actate	, line 2		•	\$142502.00
55. F	fait 1. Total real estate	, lille 2			
56. <b>p</b>	oart 2 total vehicles, line	e 5	\$9125.00		
57. <b>P</b>	art 3: Total personal an	d household items, line 15	\$1165.00		
58. <b>P</b>	art 4: Total financial as	sets, line 36	\$880.00		
59. <b>F</b>	Part 5: Total business-re	elated property, line 45			
60. <b>F</b>	Part 6: Total farm- and f	ishing-related property, line 52			
	Part 7: Total other prope				
		Add lines 56 through 61			<b>A</b>
			\$11170.00	Copy personal property total	+ \$11170.00
					\$153672.00
63. <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			<u> </u>

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Fill in this information to identify your case:					
Debtor 1	Timika		Pipes		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
			(State)		
Case number (If known)					

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Identify the Property You Clair	m as Exempt				
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.					
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)			
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(	2)			
2.	For any property you list on Schedule A	A/B that you claim as e	exempt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description:  8926 S. Marshfield , Chicago, IL 60620  Line from Schedule A/B:  01	\$142,502.00	\$0  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901		
	Brief description: Chevrolet Cruz, 2011 Line from Schedule A/B: 03	\$0.00	\$0  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)		
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case?			

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 Debtor 1 First Name
 Timika
 Pipes
 Case number (if known)

 Last Name
 Last Name

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Chevrolet Tahoe, 2007 Line from	\$9,125.00	\$2,400.00; \$2,205.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
Schedule A/B:03  Brief description: Checking account,	\$522.00	\$522.00	735 ILCS 5/12-1001(b)
CitiBank  Line from Schedule A/B: 17		100% of fair market value, up to any applicable statutory limit	_
Brief description: Savings account, CitiBank Line from	\$3.00	\$3.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 17  Brief description:	\$0.00	<b>V</b>	735 ILCS 5/12-1001(b)
Checking account, Chicago Post Office Employees Credit Union Line from Schedule A/B: 17		100% of fair market value, up to any applicable statutory limit	_
Brief description: Savings account, Chicago Post Office Employees Credit Union Line from Schedule A/B: 17	\$0.00	\$0  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Checking account, PNC Bank Line from	\$15.00	\$15.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 17  Brief description: Savings account, PNC Bank Line from	\$10.00	\$10.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 17  Brief description: Checking account, PNC Bank Line from Schedule A/B: 17	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Savings account, PNC Bank Line from Schedule A/B: 17	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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Pipes Debtor 1 Timika Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$225.00 description: **✓** \$225.00 Checking account, PNC 100% of fair market value, up to any Bank applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$0.00 description: \$0 Savings account, PNC 100% of fair market value, up to any Bank applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief description: \$700.00 **✓** \$700.00 Misc. Household 100% of fair market value, up to any **Furniture & Goods** applicable statutory limit Line from Schedule A/B: 06 Brief 735 ILCS 5/12-1001(a) \$250.00 description: **✓** \$250.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$200.00 description: \$200.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$15.00 description: **✓** \$15.00 Misc. Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$5.00 description:

Cash on Hand

16

Line from

Schedule A/B:

\$5.00

100% of fair market value, up to any

applicable statutory limit

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Fill in	this information to identify your ca	se:			
Dobto	or 1 Timiko	Dingo			
Debto	or 1 <u>Timika</u> First Name	Pipes Middle Name Last Name			
Debto	or 2				
(Spous	ee, if filing) First Name	Middle Name Last Name			
United	d States Bankruptcy Court for the:	Northern District of Illinois (State)			
Case (If know	number vn)	(State)			
Off	icial Form 106D		_		Check if this is a
Scl	hedule D: Credito	ors Who Have Claims Secur	ed by Pror	ertv	12/1
Be as	complete and accurate as possib	le. If two married people are filing together, both are equal to the same of t	ually responsible for s	supplying correct info	
	and case number (if known).	mair age, in it out, number the entires, and attach it to	tills form. On the top	or any additional pag	jes, write your
1. I	Do any creditors have claims se	ecured by your property?			
- 1	No. Check this box and subm	nit this form to the court with your other schedules. You ha	ve nothing else to rep	ort on this form.	
i	Yes. Fill in all of the information	n below.			
Part					
2.	List all secured claims. If a credit	tor has more than one secured claim, list the creditor	Column A	Column B	Column C
	•	nan one creditor has a particular claim, list the other creditors the claims in alphabetical order according to the creditor's	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	PNC MORTGAGE		\$170,672,00	\$142,502.00	\$28,170.00
2.1	Creditor's Name	Describe the property that secures the claim:	\$170,672.00	\$142,502.00	\$20,170.00
	PO BOX 8703  Number Street	8926 S. Marshfield, Chicago, IL 60620  As of the date you file, the claim is: Check all that apply.			
	Number Street	Contingent			
	DAYTON OH 45401	Unliquidated			
	City State ZIP Code	Disputed			
	Who owes the debt? Check one.				
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from a lawsuit			
	Check if this claim relates	Other (including a right to offset)			
	to a community debt  Date debt was 7/2015 incurred	Last 4 digits of account number1814			
2 2	WELLS FARGO DEALER SVC		¢10.745.00	0.00	¢10.745.00
2.2	Creditor's Name	Describe the property that secures the claim:	<u>\$10,745.00</u>	\$0.00	<u>\$10,745.0</u> 0
	PO BOX 19657  Number Street	2011 Chevrolet Cruz  As of the date you file, the claim is: Check all that apply.	_		
	Number Street	Contingent			
	IRVINE CA 92623	Unliquidated			
	City State ZIP Code	Disputed			
	Who owes the debt? Check one.	<b>□</b> ·			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only  Debtor 1 and Debtor 2 only	✓ An agreement you made (such as mortgage or secured car loan)	ļ		
	At least one of the debtors	Statutory lien (such as tax lien, mechanic's lien)			
	and another	Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)			
	Date debt was 1/2016 incurred	Last 4 digits of account number2143			
	Add the dollar value of y here:	your entries in Column A on this page. Write that number	\$181,417.00		

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Debtor 1 Timika		Pipes	Case n	umber (if known)		
First Name	Middle Name	Last Name				
Additional Page  Part:1  After listing any entries 2.4, and so forth.	on this page, numb	er them beginning with 2.	3, followed by	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
City of Chicago Water Department Creditor's Name  333 S State, Suite 300  Number Street  Chicago IL 60604  City State ZIP Coc Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors an another  Check if this claim relates a community debt  Date debt was incurred	B926 S. Marsh \$142,502.00  As of the date Contingen Unliquidate Disputed Nature of lien An agreem car loan)  Statutory li  Judgment Other (inclu		/alue: eck all that apply. tgage or secured		\$142,502.00	\$0.00
Add the dollar value of here:	your entries in Col	umn A on this page. Write	that number	\$700.00		
If this is the last page Write that number her	•	e dollar value totals from	all pages.	\$182,117.00		

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Fill i	n this infori	mation to identify your c	ase:						
Deb	tor 1	Timika First Name	Middle Name	Pipes Last Name					
Deb	tor 2	riist Name	Wildule Name	Last Name					
	use, if filing)	First Name	Middle Name	Last Name					
Unit	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)					
Cas (If knd	e number own)								
Off	ficial F	orm 106E/F					Che	eck if this is ar	n amended filing
Sc	hedu	ıle E/F: Cre	ditors Who	Have Un	secured	Claims			12/15
othe Form clain	r party to a n 106A/B) a ns that are entries in t vn).	any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D: C</i> he boxes on the left. At	ble. Use Part 1 for credits or unexpired leases that cutory Contracts and Unicreditors Who Hold Claims tach the Continuation Pa	t could result in a c expired Leases (Of s Secured by Prope	claim. Also list exe ficial Form 106G). erty. If more space	cutory contract: Do not include a is needed, copy	s on <i>Sched</i> iny creditor the Part ye	ule A/B: Prop rs with partia ou need, fill i	perty (Official ally secured it out, number
1.		reditors have priority un Go to Part 2.	secured claims against y	ou?					
2.	listed, ider As much a Continuat	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	d claims. If a creditor has n is. If a claim has both prioris in alphabetical order accore than one creditor holds a claim, see the instructions	ty and nonpriority ar ding to the creditor's particular claim, list	nounts, list that clair s name. If you have the other creditors in	n here and show more than two pr	both priority	y and nonprio	rity amounts.
							Total	Priority	Nonpriority

claim

amount

amount

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Debtor	1 Timika	Pipes	Case number (if known)	
D. 10	First Name Middle Name	Last Name		
3. Do	List All of Your NONPRIORITY Unsecured any creditors have nonpriority unsecured claims a No. You have nothing to report in this part. Subm Yes.	ngainst you?	e court with your other schedules.	
uns If n	secured claim, list the creditor separately for each claim.	. For each claim I	r of the creditor who holds each claim. If a creditor has more the isted, identify what type of claim it is. Do not list claims already included Part 3. If you have more than four priority unsecured claims fill out the contract of the credit of the credi	uded in Part 1.
				Total claim
N C	CAPITALONE  Jonpriority Creditor's Name  Jo Pollack & Rosen, P.C  Jumber Street		Last 4 digits of account number 2978 When was the debt incurred? 3/2014	\$3,422.00
1 k C V U U U U	825 Barrett Lakes Blvd Suite 510  Kennesaw Georgia 30144 City State Zip Co Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community deb sthe claim subject to offset?  No Yes	ode	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard	
	CHGO PO ECU Ionpriority Creditor's Name		Last 4 digits of account number 2012	\$555.00
- - - - - - - - - - - - - - - - - - -	O025 S WESTERN  Jumber Street  CHICAGO Illinois 60643  City State Zip Co  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community deb is the claim subject to offset?  No  Yes	ode	When was the debt incurred? 12/2009  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify UnknownLoanType	
	City of Chicago Parking Ronpriority Creditor's Name 21 N. LaSalle St # 107A Rumber Street  Chicago Illinois 60602 City State Zip Co Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community deb s the claim subject to offset?  No Yes	ode	When was the debt incurred?	\$700.00

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Pipes Debtor 1 Timika Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Commonwealth Edison \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Ctr FI 4 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60181 Oakbrook Ter Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Electric Bill Is the claim subject to offset? **✓** No T Yes CREDIT CONTROL SERVICE \$372.00 6908 Last 4 digits of account number \_\_\_ Nonpriority Creditor's Name When was the debt incurred? 2/2017 725 CANTON ST Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated NORWOOD Massachusetts 02062 Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - American Family Other. Specify Insurance Is the claim subject to offset? **✓** No Yes Illinois Tollway 4.6 \$800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave n/a Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove 60515 Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Tollway Violations

✓ No ✓ Yes

Is the claim subject to offset?

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Pipes Debtor 1 Timika Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 MERRICK BANK CORP \$3,446.00 Last 4 digits of account number 5881 Nonpriority Creditor's Name PO BOX 9201 When was the debt incurred? 1/2012 Street Number As of the date you file, the claim is: Check all that apply. Contingent 11804 **OLD BETHPAGE** New York Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No Yes 4.8 MOHELA/DEPT OF ED \$16,759.00 Last 4 digits of account number 0001 Nonpriority Creditor's Name 633 SPIRÍT DR When was the debt incurred? 10/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHESTERFIELD 63005 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes MOHELA/DEPT OF ED 4.9 \$3,000.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 633 SPIRIT DR When was the debt incurred? 9/2016 Number As of the date you file, the claim is: Check all that apply. Contingent CHESTERFIELD 63005 Missouri Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt

No Yes

Is the claim subject to offset?

debts Other. Specify

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Pipes Debtor 1 Timika Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 MOHELA/DEPT OF ED \$2,929.00 Last 4 digits of account number Nonpriority Creditor's Name 633 SPIRIT DR When was the debt incurred? 1/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent CHESTERFIELD 63005 Missouri Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.11 Navient \$5,986.00 Last 4 digits of account number 0825 Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 8/2004 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes Navient 4.12 \$3,096.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 8/2004 Number As of the date you file, the claim is: Check all that apply. Contingent **WILKES BARRE** 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

Yes

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**Pipes** Debtor 1 Timika Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Navient \$1,515.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 3/2005 Number Street As of the date you file, the claim is: Check all that apply. Contingent <u>Penn</u>sylvania WILKES BARRE 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.14 \$1,032.00 Last 4 digits of account number 0309 Nonpriority Creditor's Name PO BOX 9655 When was the debt incurred? 3/2005 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes Peoples Gas 4.15 \$600.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60601 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Gas Bill Is the claim subject to offset? **✓** No

Yes

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Pipes Debtor 1 Timika Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/WALMART 4.16 \$2,942.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9/2012 Po Box 530927 Number As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30353 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? Yes 4.17 Village of Chicago Ridge \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 10455 S. Ridgeland Ave. When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Ridge Illinois 60415 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Tickets Is the claim subject to offset? **✓** No Yes WFFNATBANK 4.18 \$3,208.00 7001 Last 4 digits of account number Nonpriority Creditor's Name 4455 SPRING MOUNTAIN RD When was the debt incurred? 4/2016 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated LAS VEGAS 89102 Nevada Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No

Yes

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	īmika			Pipes	Case r	number (if known)		
	irst Name		iddle Name	Last Name	. al			
t 3: L	ist Others to E	e Notified Ab	out a Debt That	You Already Liste	<b>ea</b>			
collec	ction agency is t	rying to collect e. Similarly, if y	from you for a del ou have more that	ot you owe to some on one creditor for an	one else, list the only of the debts that	ou already listed in Parts 1 or 2. For example, if a briginal creditor in Parts 1 or 2, then list the at you listed in Parts 1 or 2, list the additional r 2, do not fill out or submit this page.		
	ican Family Insura	ince						
Name	ne			On which entry in Part 1 or Part 2 did you list the original creditor?				
40 TE	TECHNOLOGY PARKWAY SOUTH # 300			Line 4.5 of (Check	of (Check	Part 1: Creditors with Priority Unsecured Claims		
Numb	imber Street			one):		Part 2: Creditors with Nonpriority Unsecured Claims		
Peach Corne		Georgia	30092	Last 4 digits o	f account numbe	r 6908		
City		State	Zip Code					
Harris	& Harris LTD							
Name				On which entr	y in Part 1 or Par	t 2 did you list the original creditor?		
111 V	West Jackson Bou	levard Suite 400		Line 4.3	of (Check	Part 1: Creditors with Priority Unsecured Claims		
Numb	oer Street			<u> </u>	one):	Part 2: Creditors with Nonpriority Unsecured Claims		
Chica	ıgo	Illinois	60604	Last 4 digits o	f account number	•		
City		State	Zip Code	Educi + digita 0	. account manne	·		

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Debtor 1 Timika **Pipes** Case number (if known) Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$34,317.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00

\$16,545.00

\$50,862.00

6h. Debts to pension or profit-sharing plans, and other similar

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

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Debtor 1	Timika		Pipes
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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	0430 17 230	Do	cument Page 3	35 of 71
this infor	mation to identify your o	case:		
or 1	Timika		Pipes	
	First Name	Middle Name	Last Name	
	First Name	Middle Name	Last Name	
d States B	ankruptcy Court for the:	Northern	District of Illinois	
	. ,		(State)	_
	-			<del></del>
				Check if this is an amended filing
icial	Form 106H			a
edul	e H: Your Cod	zebtors		12/15
No Ye  Within t California  ✓ No	s he last 8 years, have you, a, Idaho, Louisiana, Neva ob. Go to line 3. s. Did your spouse, for No Yes. In which commu	ou lived in a community p ada, New Mexico, Puerto Rid mer spouse, or legal equiv unity state or territory did y	roperty state or territory? co, Texas, Washington, and valent live with you at the ti ou live?	( <i>Community property states and territories</i> include Arizona, Wisconsin.)  me?
	Name of your spouse,	former spouse, or legal equi	valent	
	Number Street			_
	-			<del>_</del>
	City	State	Zip Code	
again as	nn 1, list all of your coo s a codebtor only if tha	debtors. Do not include yo t person is a guarantor or	our spouse as a codebtor it cosigner. Make sure you	f your spouse is filing with you. List the person shown in line 2 have listed the creditor on Schedule D (Official Form 106D), edule D, Schedule E/F, or Schedule G to fill out Column 2.
again as Schedul	nn 1, list all of your coo s a codebtor only if tha	debtors. Do not include yo t person is a guarantor or	our spouse as a codebtor it cosigner. Make sure you	have listed the creditor on Schedule D (Official Form 106D),
again as Schedul	nn 1, list all of your coo s a codebtor only if tha le <i>E/F</i> (Official Form 10	debtors. Do not include yo t person is a guarantor or	our spouse as a codebtor it cosigner. Make sure you	have listed the creditor on Schedule D (Official Form 106D), edule D, Schedule E/F, or Schedule G to fill out Column 2.
	or 1  or 2  re, if filing)  d States B  number  or)  iCial  nedulo  tors are together, tries in t  n). Answe  Do you I  Ye  Within t California	Timika First Name  or 2  .e., if filing)  First Name  d States Bankruptcy Court for the:  number  or icial Form 106H  nedule H: Your Coc  stors are people or entities who cogether, both are equally responderies in the boxes on the left. At any codebtors? (If  No  Yes  Within the last 8 years, have ye California, Idaho, Louisiana, Neva  No. Go to line 3.  Yes. Did your spouse, for long in the last of your spouse, long in the last o	this information to identify your case:  or 1  Timika First Name Middle Name  or 2  ie, if filing) First Name Middle Name  d States Bankruptcy Court for the:  Northern  number  or I  icial Form 106H  nedule H: Your Codebtors  of tors are people or entities who are also liable for any deterogether, both are equally responsible for supplying correctives in the boxes on the left. Attach the Additional Page on). Answer every question.  Do you have any codebtors? (If you are filing a joint case, of No  Yes  Within the last 8 years, have you lived in a community procalifornia, Idaho, Louisiana, Nevada, New Mexico, Puerto Rice No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equity No  Yes. In which community state or territory did you name of your spouse, former spouse, or legal equity  Name of your spouse, former spouse, or legal equity  Number Street	this information to identify your case:  or 1

60623

Zip Code

1314 S Tripp

Illinois

State

Street

Number

Chicago City

Schedule E/F, line 4.5

Schedule G, line \_\_

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			20	oamone	. ago o	01.71		
Fill in	this inf	ormation to identify	your case:					
Debto	r 1	Timika		Pipes				
		First Name	Middle Name	Last Na	ame	— Che	eck if this is:	
Debto		First Name	Middle Noves	L aat Ni		_	An amended filing	
			Middle Name	Last Na			A supplement showing post-p	etition chanter 13
United the:	l States I	Bankruptcy Court for	Northern	District of Illin	nois tate)		expenses as of the following d	
	number			(5	iai <del>e</del> )			
(If know	vn)						MM / DD / YYYY	
Offi	cial I	orm 106I						
Sch	edul	e I: Your In	come					12/15
spous	e. If mo er (if kn		l, attach a separate she y question.				not include information al ional pages, write your na	-
1. Fi	ll in youi	r employment		Debtor 1			Debtor 2	
in	formatio	n.	Employment status	C Carala				
	-	more than one job, parate page with	Zimproymont otatao	✓ Employ	yea nployed		Employed  Not Employed	
		about additional		LI NOT EII	трюува		Not Employed	
er	nployers.		Occupation	Special Ed	Assistant		_	
		t time, seasonal, or yed work.	Employer's name	CPS				
			Employer's address	125 S Clark				
	•	n may include student aker, if it applies.		Number Str	eet		Number Street	
							_	
				Chicago City	Illinois State	60603 Zip Code	City State	Zip Code
				11 years 2		Zip dddd	Only Oraco	2.0 0000
			How long employed there?	11 your 2				
Part	2: Giv	e Details About N	Nonthly Income					
spou	ise unles	s you are separated.	-	•			write \$0 in the space. Include	
		non-illing spouse nave attach a separate she		combine the i			or that person on the lines belo	w. It you need
					For	Debtor 1	non-filing spouse	
			ary, and commissions (befo , calculate what the monthly		2.	\$3,917.33		
3.	Estimate	and list monthly over	rtime pay.		3.	+ \$0.00		
4.	Calculat	e gross income. Add li	ine 2 + line 3.		4.	\$3,917.33		

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Debto		Pipes	Case numbe	er <i>(if</i>	
	First Name Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here	<b>→</b> 4. <sup>=</sup>	\$3,917.33		
-	all payroll deductions:				
5a.	Tax, Medicare, and Social Security deductions	5a.	\$718.27		
5b.	Mandatory contributions for retirement plans	5b.	\$82.29		
5c.	Voluntary contributions for retirement plans	5c.	\$0.00		
5d.	Required repayments of retirement fund loans	5d.	\$0.00		
5e.	Insurance	5e.	\$0.00		
5f.	Domestic support obligations	5f.	\$0.00		
5g.	Union dues	5g.	\$65.46		
5h.	Other deductions. Specify:	5h. +	\$0.00 +	·	
6. <b>Add</b> +5h.	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g 6.	\$866.02		
7. Calo	culate total monthly take-home pay. Subtract line 6 from line	e 4. 7.	\$3,051.32		
8. List	all other income regularly received:				
8a.	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	i 8a.	\$0.00		
8b.	Interest and dividends	8b.	\$0.00		
8c.	Family support payments that you, a non-filing spouse, or dependent regularly receive	а			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$300.00		
8d.	Unemployment compensation	8d.	\$0.00		
8e.	Social Security	8e.	\$0.00		
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income	s 8f.	\$230.00		
	Pension or retirement income	8g.	\$0.00		
8h.	Other monthly income. Specify: Prorated Tax Refund	8h. +	\$794.00 +		
	<b>all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9.	\$1,324.00		
	culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s	10. pouse	\$4,375.32	=	\$4,375.32
Inc frier	ate all other regular contributions to the expenses that you do contributions from an unmarried partner, members of your nds or relatives.  not include any amounts already included in lines 2-10 or amo	r household, your c	lependents, your roomr		
Spe	ecify:			11. +	\$0.00
	d the amount in the last column of line 10 to the amount is the that amount on the Summary of Schedules and Statistical Schedules and Sched				\$4,375.32
VVII	to that amount on the outlinary of outleadies and oldistical ob	mmay of Ocitalii L	ламниог ана Попасси De	ла, п к аррпоэ	Combined monthly income
13. <b>Do</b>	you expect an increase or decrease within the year after No.	you file this form?	•		monany moonie
	Yes. Explain:				

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			anone rago co or ra	_	
Fill in this infor	mation to identif	y your case:			
Debtor 1	Timika		Pipes		
Dalatano	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng
United States E	Bankruptcy Court	for the: Northern I	District of Illinois		howing post-petition chapter 13 the following date:
Case number			(State)		J. M.
(If known)				MM / DD / YYY	Y
Official	Form 10	<u> 16J</u>			
Schedul	e J: Your	Expenses			12/15
information. If		as possible. If two married people a leeded, attach another sheet to this lion.			
Part 1: Des	cribe Your Ho	usehold			
1. Is this a joi	int case?				
✓ No. Go	o to line 2				
Yes. D	oes Debtor 2 liv	e in a separate household?			
	No				
i i	Yes. Debtor 2	must file Official Forms 106J-2, Exper	nses for Separate Household of Debi	or 2.	
2. Do you hav	re dependents?	■ No			
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to	Dependent's	Does dependent live
Debtor 2.		each dependent	Debtor 1 or Debtor 2 Child	<b>age</b> 22 years	with you?
			Office		Yes.
			Child	18 years	No.
					Yes.
			Child	16 years	No.
			Child	16 years	Yes.
			Offilia	16 years	Yes.
			Child	14 years	No.
					Yes.
			Child	11 years	No.
			Child	3 voore	Yes.
			Citild	3 years	Yes.
	penses include	□ No			
expenses o than	f people other	✓ No			
yourself an dependent	-	Yes			
dependent	<b>3</b> :				
Part 2: Esti	mate Your On	going Monthly Expenses			
-	of a date after th	your bankruptcy filing date unless yne bankruptcy is filed. If this is a sup			
		ch non-cash government assistance Sluded it on Schedule I: Your Income			Your expenses
	I or home owner or the ground or I	rship expenses for your residence. In	clude first mortgage payments and		\$1,720.00
-	luded in line 4:	· · ·			4.
	state taxes				4a <b>\$0.00</b>
	•	s, or renter's insurance			4b. <b>\$0.00</b>
Official Form	n 106J maintenance, rep	pair, and upkeep expenses	chedule J: Your Expenses		4c. page 1 <b>\$0.00</b>

4d.

\$0.00

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Timika
 Pipes
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities         6. Electricity, healt, natural gas         6.         \$255.00           60. Valler, sever, garbage collection         60.         \$0.00           61. Chelphone, cell phone, Internet, stellile, and cable services         60.         \$0.00           61. Chelphone, cell phone, Internet, stellile, and cable services         61.         64.         \$300.00           61. Chelphone, cell phone, Internet, stellile, and cable services         60.         60.         \$0.00           61. Chelphone, cell phone, Internet, stellile, and cable services         61.         64.         \$300.00           7. Food and housekeeping supplies         7.         \$880.00         8.         \$0.00           8. Childrage and children's education costs         8.         \$0.00         \$255.00           10. Personal care products and services         10.         \$225.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         14.         \$0.00           15. Install insurance         158.         \$0.00           15. Live insurance.	First Name	Middle Name Last Name		
6. Utilities:         6. Electricity, heat, natural gas         6. S. \$25,00           6b. Water, sewer, garbage collection         6b. \$0,00           6b. Talesphone, cell phone, Internet, satellite, and cable services         6c. \$0,00           6d. Other, Specily; Family Cell Phone Bill         6d. \$300,00           7. Food and housekeeping supplies         8. \$0,00           8. Childcare and children's education costs         8. \$0,00           9. Clothing, laundry, and dry cleaning         9. \$175,00           10. Personal care products and services         10. \$225,00           11. Medical and dental expenses         11. \$0,00           12. Transportation, Include gas, maintenance, bus or train fare.         12. \$275,00           Do not include car payments         12. \$275,00           14. Charitable contributions and religious donations         13. \$0,00           15. Instratament, clubs, recreation, newspapers, magazines, and books         13. \$0,00           16. Charitable contributions and religious donations         15. \$200,00           15. Insurance.         15a         \$0,00           15b. Health insurance         15a         \$0,00           15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.         \$0,00           15c. Vehicle insurance. Specify:         15a         \$0.00           15c. Vehicle				Your expenses
68. Electricity, heat, natural gas         6a.         \$250.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$0.00           6d. Other, Specify: Family Cell Phone Bill         7.         \$850.00           7. Food and housekeeping supplies         7.         \$850.00           8. Childcare and children's education costs         9.         \$1515.00           10. Personal care products and services         11.         \$20.00           11. Medical and dental expenses         11.         \$25.00           11. Medical and dental expenses         12.         \$257.00           15. International, cluids gas, maintenance, bus or train fare.         12.         \$257.00           16. Charitable contributions and religious donations         13.         \$0.00           15. International, cluids, recreation, newspapers, magazines, and books         15.         \$0.00           15. International, cluids insurance         15.         \$0.00           15. Life insurance         15.         \$0.00           15. Life insurance         15.         \$0.00           15. Life insurance. Specify:         15.         \$1.           15. Life insurance. Specify:         15.         \$0.00	5. Additional mortgage payme	nts for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$0.00           6d. Other. Specify: Family Cell Phone Bill         6c.         \$0.00           7. Food and housekeeping supplies         7.         \$850.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$175.00           10. Personal care products and services         11.         \$0.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$275.00           10. Do not include gar payments         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance         15a         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance. Specify:         15a         \$0.00           17c. Testalliment or lease payments:         17a         \$0.00	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$0.00           6c. Other. Specify: Family Cell Phone Bill         6d.         \$300.00           7. Food and house-keeping supplies         8.         \$0.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$175.00           10. Personal care products and services         10.         \$225.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$275.00           Do not include: programents         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Intertainment, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Intertainment clude insurance deducted from your pay or included in lines 4 or 20.         \$0.00         \$0.00           15. Leath insurance         15.         \$0.00           15. Leath insurance.         15.         \$0.00           15. Leath insurance.         15.         \$0.00           15. Leath insurance.         \$0.00         \$0.00           15. Leath insurance.         \$0.00 <td>6a. Electricity, heat, natural ga</td> <td>as</td> <td>6a.</td> <td>\$250.00</td>	6a. Electricity, heat, natural ga	as	6a.	\$250.00
6d. Other. Specify: Family Cell Phone Bill	6b. Water, sewer, garbage co	llection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$850.00           8. Childrane and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$175.00           10. Personal care products and services         10.         \$225.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$2275.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15s         \$0.00           15b. Habith insurance ededucted from your pay or included in lines 4 or 20.         15c         \$15b         \$0.00           15c. Vehicle insurance. Specify:         15c         \$0.00	6c. Telephone, cell phone, In	ternet, satellite, and cable services	6c.	\$0.00
8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$175.00           10. Personal care products and services         10.         \$225.00           11. Medical and dental expenses         11.         \$205.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments         12.         \$275.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15a         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15b. Health insurance         15a         \$0.00           15c. Vehicla insurance.         15c         \$170.00           15d. Other insurance. Specify:         15c         \$0.00           15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Taxes, 10 not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17a. Car payments for Vehicle 1         17a         \$0.00           17b. Cother. Specify:         17c         \$0.00           17c. Other. Specify:         17c         \$0.00           17c. Other. Specify:         17c         \$0.00	6d. Other. Specify: Family 0	ell Phone Bill	6d	\$300.00
9. Clothing, laundry, and dry cleaning       9.       \$175.00         10. Personal care products and services       10.       \$225.00         11. Medical and dental expenses       11.       \$205.00         12. Transportation. Include gas, maintenance, bus or train fare.       2575.00         Do not include car payments       13.       \$50.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.       \$0.00         15. Insurance.       155.       \$0.00         15a. Life insurance deducted from your pay or included in lines 4 or 20.       156.       \$0.00         15b. Health insurance       156       \$0.00         15c. Vehicle insurance. Specify:       156       \$0.00         15c. Vehicle specify:       176       \$0.00         17c. Other. Specify:       176       \$0.00         17c. Car payments for Vehicle 2       176       \$0.00         17c. Other. Sp	7. Food and housekeeping sup	pplies	7.	\$850.00
10. Personal care products and services       10.       \$225.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$275.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15.       \$0.00         15. Insurance deducted from your pay or included in lines 4 or 20.       15.       \$0.00         15b. Health insurance       15a       \$0.00         15c. Vehicle insurance Specify:       15c       \$170.00         15c. Vehicle insurance. Specify:       15c       \$0.00         15c. Vehicle insurance.       15c       \$0.00	8. Childcare and children's ed	ucation costs	8.	\$0.00
11. Medical and dental expenses	9. Clothing, laundry, and dry o	leaning	9.	\$175.00
12   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12   \$275.00     13   Entertainment, clubs, recreation, newspapers, magazines, and books   13   15   16     14   Charitable contributions and religious donations   14   \$0.00     15   Insurance   15   Insurance   15   16   \$0.00     15   Insurance   15   Insurance   15   \$0.00     15   Insurance   Insurance	10. Personal care products ar	d services	10.	\$225.00
Do not include a payments   13.	11. Medical and dental expen	ses	11.	\$0.00
14. Charitable contributions and religious donations   14. S0.00	_		12.	\$275.00
15. Insurance.	13. Entertainment, clubs, reci	eation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.	14. Charitable contributions a	nd religious donations	14.	\$0.00
15b. Health insurance   15b   \$0.000   15c. Vehicle insurance   15c   \$170.00   15d. Other insurance. Specify:		ucted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance   15c   \$170.00     15d. Other insurance. Specify:	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$170.00
Specify:         16         \$0.00           17. Installment or lease payments:         17. Installment or lease payments         17. Installment or lease payments           17a. Car payments for Vehicle 1         17a         \$0.00           17b. Car payments for Vehicle 2         17b         \$0.00           17c. Other. Specify:         17d         \$0.00           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).         18.         \$0.00           19. Other payments you make to support others who do not live with you.         \$0.00         \$0.00           20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.         20a         \$0.00           20b. Real estate taxes.         20b         \$0.00           20c. Property, homeowner's, or renter's insurance         20c         \$0.00           20d. Maintenance, repair, and upkeep expenses.         20d         \$0.00	15d. Other insurance. Specify	/ <u>:</u>	15d	\$0.00
17. Installment or lease payments:       30.00         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00	16. Taxes. Do not include taxes	deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you. Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease paym	ents:	10	
17c. Other. Specify:	17a. Car payments for Vehicl	e 1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehic	e 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.				\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00			ducted from	\$0.00
Specify:		·	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		to support others who do not live with you.	10	<b>#0.00</b>
20a. Mortgages on other property20a\$0.0020b. Real estate taxes.20b\$0.0020c. Property, homeowner's, or renter's insurance20c\$0.0020d. Maintenance, repair, and upkeep expenses.20d\$0.00		es not included in lines 4 or 5 of this form or on Schedul		\$0.00
20b. Real estate taxes.  20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d \$0.00				\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		•		
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		or renter's insurance		

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Debtor 1 Timil			Pipes	Case number (if known)		
First	Name	Middle Name	Last Name			
21. <b>Other.</b> Spe	ecify:				21	\$0.00
	your monthly expense	es.				\$3,965.00
	nes 4 through 21.					\$0.00
. ,	` , ,	,, ,,	from Official Form 106J-2			\$3,965.00
22c. Add li	ne 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23. Calculate	your monthly net inco	me.				
23a. Copy	line 12 (your combined	monthly income) from S	Schedule I.		23a	\$4,375.32
23b. Copy	your monthly expenses	from line 22 above.			23b	\$3,965.00
	act your monthly expens		icome.			\$410.32
The r	esult is your monthly net	t income.			23c	
			oan within the year or do yo			

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Fill in this information to identify your case:									
Debtor 1	Timika	Pipes							
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)						
Case number (If known)									

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below									
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
	✓ No									
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).								
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and								
×	/s/ Timika Pipes	×								
	Signature of Debtor 1	Signature of Debtor 2								
	Date 10/3/2017	Date								
	MM/DD/YYYY	MM/DD/YYYY								

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Fill in thi	is infor	nation to identify your c	ase:					
Debtor 1	I	Timika First Name	Middle I		pes ast Name			
Debtor 2 (Spouse, it		First Name	Middle I	Name La	ast Name	_		
United S	States B	ankruptcy Court for the:	Northern		of Illinois			
Case nu (If known)	mber				(State)			
Offic	cial	Form 107						Check if this is a amended filing
-		nt of Financia	l Affairs f	or Individu	ıals Filing	for Bankrı	uptcv	04/1
informa number	tion. It (if kno	te and accurate as po i more space is neede own). Answer every q	d, attach a sepa uestion.	arate sheet to thi	s form. On the to			
Part 1:	Give	Details About Your	Maritai Status	and where You	Lived Before			
1. W	hat is	your current marital sta	itus?					
	_	ried married						
2. D	uring t	he last 3 years, have yo	u lived anywhere	e other than where	you live now?			
	No Yes	. List all of the places yo	u lived in the las	t 3 years. Do not in	nclude where you	ive now.		
	Deb	tor 1:		Dates Debtor 1 there	lived Debtor	2:		Dates Debtor 2 lived there
					Sar	ne as Debtor 1		Same as Debtor 1
		3 W. 98th Place		From 02/2013 To 07/2015	Number	r Street		From
	Chic City	0	60643 Zip Code		City	State	Zip Code	
					Sar	ne as Debtor 1		Same as Debtor 1
	Nun	nber Street		From	Number	Street		From To
	City	State	Zip Code		City	State	Zip Code	
	<i>territor</i> No	last 8 years, did you e ies include Arizona, Califo Make sure you fill out So	rmia, Idaho, Louis	siana, Nevada, New	Mexico, Puerto Ric			mmunity property states

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**Pipes** Debtor 1 Timika Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$22499.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$31218.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$26000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) Est. 2017 YTD Child From January 1 of current year until \$2,700.00 Support the date you filed for bankruptcy: Est. 2017 YTD LINK \$2,070.00 Est. 2016 Child For last calendar year: \$3,600.00 Support 2016 (January 1 to December 31, Est. 2016 LINK \$2,760.00 Est. 2016 Unemployment \$1,712.00 Est. 2015 Child For the calendar year before that: \$3,600.00 Support (January 1 to December 31, 2015 Est. 2015 LINK \$2,760.00

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**Pipes** Debtor 1 Timika \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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or	1 Timika			Pip	oes	Case number	(if known)
	First Name		Middle Name	Las	t Name		
ns or age	siders include your porations of which	relatives; a n you are a for a busin	iny general partners in officer, director, p less you operate as	; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
<b>√</b>	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
ins	ider? lude payments on	debts gua	ranteed or cosigne	d by an insider.	y payments or trans	fer any property o	n account of a debt that benefited an
	res. List all pay	menis ina	t benefited an insi	Dates of	Total amount	Amount you	Reason for this payment
				payment	paid	still owe	Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Debtor 1 Timika **Pipes** Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	or 1	Timika		Pipes	Case number (if known,	)	
		First Name	Middle Name	Last Name			
11.			filed for bankruptcy, did a e a payment because you		ank or financial institution,	set off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
		•		Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account r	number: XXXX-		
12	Wit	City State	•	y of your property in the	possession of an assignee fo	or the benefit of a	creditors a court-
12.			odian, or another official?	y or your property in the	possession of an assignee to	or the benefit of t	neditors, a court-
		No Yes					
Part	5:	List Certain Gifts and	d Contributions				
13.				ou give any gifts with a to	otal value of more than \$600	) per person?	
	<b>✓</b>	<b>=</b>	,,,		•	, p	
	Ē	Yes. Fill in the details f	for each gift.				
		Gifts with a total value per person	e of more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You G	ave the Gift				
		Number Street					
		City State	e Zip Code				
		Person's relationship to	you				
		Person to Whom You G	ave the Gift				
		Number Street					
		City State	e Zip Code				
		Person's relationship to					

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	Timika	Pipes	Case number (if know	n)	
	First Name Middle Name	Last Name		·	
Wit	hin 2 years before you filed for bankruptcy	r, did you give any gifts or contribut	ions with a total value of	of more than \$600	to any charity?
<b>V</b>	No				
Ħ	Yes. Fill in the details for each gift or contr	ribution			
ш					
	Gifts or contributions to charities that total more than \$600	Describe what you contril	outed	Date you contributed	Value
	that total more than \$000			Contributed	
	Charity's Name				
	Number Street				
	City Chata Zin Conda				
	City State Zip Code				
t 6:	List Certain Losses				
gar	hin 1 year before you filed for bankruptcy on high	or since you filed for bankruptcy, d	d you lose anything bed	ause of theft, fire,	other disaster, or
⊻	No				
	Yes. Fill in the details.				
	Describe the property you lost and	Describe any insurance c		Date of your	Value of property
	how the loss occurred	Include the amount that ins		loss	lost
		pending insurance claims o A/B: Property.	n line 33 of <i>Schedule</i>		
		A.B. Floperty.			
					_
t 7:	List Certain Payments or Transfers				
abo	hin 1 year before you filed for bankruptcy, out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare	kruptcy petition?			anyone you consult
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare No	kruptcy petition?			anyone you consult
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare	kruptcy petition?			anyone you consult
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare No	kruptcy petition?	ervices required in your ba		anyone you consult  Amount of
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare No	kruptcy petition? ers, or credit counseling agencies for s	ervices required in your ba	Date payment or transfer	
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a	ervices required in your ba	Date payment or transfer	Amount of
abo	out seeking bankruptcy or preparing a ban ude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing a banude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing a banude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing a banude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No  Semrad Law Firm  Person Who Was Paid 20 S. Clark Street  Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No  Semrad Law Firm  Person Who Was Paid 20 S. Clark Street  Number Street  28th Floor  Chicago Illinois 60603  City State Zip Code	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  Person Who Made the Payment, if Not You	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address  Person Who Made the Payment, if Not You	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Was Paid Number Street  Person Who Made the Payment, if Not You Person Who Was Paid	kruptcy petition? ers, or credit counseling agencies for s  Description and value of a transferred  Attorney's Fee - 350.00	ervices required in your ba	Date payment or transfer was made	Amount of payment

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Debto		Timika		Pipes	Case nu	mber (if known)			
		First Name	Middle Name	Last Name					
	help	nin 1 year before you filed o you deal with your credi not include any payment or	tors or to make paym		ehalf pa	y or transfer a	nny property to	anyone	who promised to
	<b>✓</b>	No Yes. Fill in the details.							
				Description and value of any programmed transferred	roperty		Date payment or transfer was made	Amou	unt of payment
		Person Who Was Paid							
		Number Street							
		City State	Zip Code						
,	t <b>he</b> Inclu	ordinary course of your b	usiness or financial af and transfers made as s	ecurity (such as the granting of a sec					
				Description and value of prope transferred		Describe any payments rec in exchange	property or eived or debts p	paid	Date transfer was made
		Person Who Received Tran	nsfer						
		Number Street							
		City State Person's relationship to yo	Zip Code u						
		Person Who Received Tran	nsfer						
		Number Street							
		City State Person's relationship to yo	Zip Code u						
	ben	hin 10 years before you fil eficiary? ese are often called asset-pro No		d you transfer any property to a sel	f-settled	I trust or simil	ar device of wh	ich you	are a
		Yes. Fill in the details.		Description and value of the p	property	transferred			Date transfer was
		Name of trust							made
		ramo or trust							

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**Pipes** Debtor 1 Timika \_ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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**Pipes** Debtor 1 Timika Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb		Timika			Pipes		(	Case number (/	if known)		
		First Name	N	liddle Name	Last Nar	me					
26.	Hav		y in any judicia	al or administra	ative proceedin	g under	any environn	nental law? Ir	nclude settlements	s and orders	s.
		No Yes. Fill in the det	ails.								
					Court or agency	У		Nature	of the case		Status of the case
		Case title			Court Name			_			Pending
		Case number		<del></del>	NumberStreet			_			On appeal
				;	City S	State	Zip Code	_			Concluded
Par	11:	Give Details Ab	oout Your Bu	siness or Co	nnections to	Any Bu	siness				
27.	Witi	A sole propri A member of A partner in a	etor or self-em a limited liabil a partnership rector, or man at least 5% of	aployed in a tra ity company (L aging executiv the voting or e Go to Part 12.	de, profession, LC) or limited lia e of a corporati quity securities	or other ability pa ion of a corp	r activity, eithe artnership (LLI poration	er full-time or	connections to any	business?	
		roo. Oncon all and	ar apply above				ure of the bus	iness	Employer Identi include Social S		
		Business Name  Number Street  City	State	Zip Code	Name of a	accounta	ant or bookke	eeper	Dates business From		
					Describe	the natu	ure of the bus	iness	Employer Identi		
		Business Name			_				EIN:		
		Number Street			Name of a	account	ant or bookke	eeper	Dates business	existed	
		City	State	Zip Code	_				From	_То	_
					Describe	the natu	ure of the bus	iness	Employer Identi include Social S		
		Business Name			_				EIN:		
		Number Street			Name of a	account	ant or bookke	eeper	Dates business	existed	
		City	State	Zip Code	_				From	То	

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Debt	tor 1 Timika			Pipes	Case number (if known)
	First Name		Middle Name	Last Name	
28.	creditors, or o			ou give a financial statemo	ent to anyone about your business? Include all financial institutions,
				Date issued	
				2410 100404	
	Name			MM/DD/YYYY	
	Number	Street		_	
	City	State	Zip Code	_	
			p		
Part	12: Sign Be	low			
t	rue and correc	et. I understand th ase can result in f	at making a false sta ines up to \$250,000,	tement, concealing prope	nents, and I declare under penalty of perjury that the answers are retry, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Timika Pipe Signature of Debt			Signature of Debtor 2
		oignature or Debi	.01 1		Date
		Date 10/3/2017			Date
[ [	No Yes			Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)? bankruptcy forms?
ļ ,	<b>√</b> No				
Ī	Yes. Name	of person			Attach the Bankruptcy Petition Preparer's Notice,

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

		Nortr	ern District of Illinois		
In re	Timika Pipes			Case No.	
_	Debtor		<del>-</del>		(If known)
				Chapter	Chapter 13
	DISCLOSURE OF	COMPEN	SATION OF ATT	ORNEY F	OR DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the	filing of the petition in bankrup	otcy, or agreed to	be paid to me, for services
	For legal services, I have agreed to ac	cept			\$4,000.00
	Prior to the filing of this statement I h	nave received			\$350.00
	Balance Due				\$3,650.00
2	. The source of the compensation paid	I to me was:			
	<b>Debtor</b>	Ot	her (specify)		
3	. The source of the compensation paid	I to me is:			
	<b>✓</b> Debtor	Ot	her (specify)		
4	I have not agreed to share the abmembers and associates of my la		ompensation with any other p	erson unless the	y are
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.				
5	5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's finan bankruptcy;</li> </ul>	cial situation, ar	nd rendering advice to the debt	tor in determining	g whether to file a petition in
	b. Preparation and filing of any	oetition, schedu	les, statements of affairs and p	olan which may b	pe required;
	c. Representation of the debtor	at the meeting o	of creditors and confirmation h	earing, and any a	adjourned hearings thereof;
	d. Representation of the debtor	in adversary pro	ceedings and other contested	bankruptcy matt	ters;
6	. By agreement with the debtor(s), the	above-disclosed	fee does not include the follo	wing services:	
			CERTIFICATION		
	I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.	e statement of a	ny agreement or arrangement	for payment to m	ne for representation of the
	10/3/2017		/s/ Amy	Gerstein	
	Date		Signature	of Attorney	
			Comrad	Law Firm	
				f law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Pipes, Timika	Case No	
Debtor(s)			
		Chapter.	Chapter13
	VERIF	FICATION OF CREDITOR MAT	RIX
Ti knowledge		erify that the attached list of creditors is tr	ue and correct to the best of their
Date:	10/3/2017	/s/ Pipes, Timika Pipes, Timika Signature of Deb	

PNC MORTGAGE Po Box 1820 Dayton, OH, 45401

MOHELA/DEPT OF ED 633 SPIRIT DR CHESTERFIELD, MO, 63005

WELLS FARGO DEALER SVC PO BOX 19657 IRVINE, CA, 92623

Navient PO BOX 9655 WILKES BARRE, PA, 18773

MERRICK BANK CORP PO Box 10368 c/o Susan Gaines Greenville, SC, 29603

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

WFFNATBANK 4455 SPRING MOUNTAIN RD LAS VEGAS, NV, 89102

SYNCB/WALMART Po Box 530927 Atlanta, GA, 30353

CHGO PO ECU 10025 S WESTERN CHICAGO, IL, 60643

CREDIT CONTROL SERVICE 5757 Phantom Dr Ste 330 Hazelwood, MO, 63042

American Family Insurance 10336 S Western Ave, Ste 24 Chicago, IL, 60643 City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Harris & Harris LTD 111 West Jackson Boulevard Suite 400 Chicago, IL, 60604

Village of Chicago Ridge 10455 S. Ridgeland Ave. Chicago Ridge, IL, 60415

Illinois Tollway PO Box 5544 Chicago, IL, 60680

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

City of Chicago Water Department 333 S State, Suite 300 Chicago, IL, 60604

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

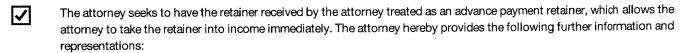
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$404.50
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$94.50 for expenses, leaving a balance due of \$4,054.50
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	10/2/2017	
Signed:		a M
/s/ Timil	ka Pipes TOLA	
	<u> </u>	/s/ Amy Gerstein
Debtor(s	5)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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Debtor 1 Timika			Case number (if known)	
First Name  Part 6: Answer These Qu	Middle Name La lestions for Reporting Purposes	ast Name		
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>			
17. Are you filing under Chapter 7? Do you estimate that after any exempt expenses are paid that funds will be available for distribution to unsecured creditors?  No. I am not filing under Chapter 7. Go to line 18.  Yes. I am filing under Chapter 7. Do you estimate that after any exemp expenses are paid that funds will be available to distribute to unsured.  No. I am not filing under Chapter 7. Go to line 18.  Yes. I am filing under Chapter 7. Do you estimate that after any exemp expenses are paid that funds will be available to distribute to unsured.  Yes. I am filing under Chapter 7. Do you estimate that after any exemp expenses are paid that funds will be available to distribute to unsured.				
18. How many creditors do you estimate that you owe?	<ul><li>✓ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>	1,000-5,000 5,001-10,000 10,001-25,00	Reserve	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?  Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001- \$50,000,001-	\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	I have examined this petition, and	d I declare under penalt	ty of periury that the in	formation provided is true and
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.			
The same and the s	If no attorney represents me and out this document, I have obtain			
	I request relief in accordance with		•	
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, o both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
	/s/ Timika Pipes Signature of Debtor 1	- 14	Signature of Debto	r 2
t to the state of	Executed on 10/2/2017 MM / DD /		Executed on	MM / DD / YYYY  wordshift integrated Application of the Control of

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Fill in this information to identify your case:				
Debtor 1	Timika		Pipes	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	·
United States Bankruptcy Court for the:		Northern	District of Illinois	
Case number (If known)			(State)	

### Official Form 106Dec

Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?			
Peclaration, and			
I			

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Debtor 1	Timika		Pipes	Case number (if known)
angularia wana na na ini ini ini	First Name	Middle Name	Last Name	
	ditors, or other parti		ou give a financial state	ment to anyone about your business? Include all financial institutions,
	No Yes. Fill in the detail:	s below.		
hand	1		Date issued	
	Name		MM/DD/YYYY	_
	Number Street		_	
	City	State Zip Code	<del>_</del>	
Part 12:	Sign Below			
true	and correct. I unders nkruptcy case can re	tand that making a false sta	tement, concealing pro	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature	of Debtor 1		Signature of Debtor 2
	Date 10/	2/2017		Date
Did y	ou attach additional	pages to Your Statement of	Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
<b>回</b>	No			
	/es			
Did y	ou pay or agree to pa	y someone who is not an at	torney to help you fill ou	t bankruptcy forms?
<b>I</b>	No.			
	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Pipes, Timika	Case No	Case No		
	Debtor(s)				
		Chapter.	Chapter13		
	VERIFI	CATION OF CREDITOR MAT	<b>TRIX</b>		
T knowledge	•	fy that the attached list of creditors is tr	rue and correct to the best of their		
Date:	10/2/2017	/s/ Pipes, Timika Pipes, Timika	140		

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Debt		Timika First Name	Middle Name	Pipes Last Name	Case number (if known)				
16		Iculate the median family in		2000 PRES 1 22000 WELLOW . V 200 . S W. A. A. A. A. A.		er ik kullen faren i helis til i kir iz izallari i kirilari iza			
10.		a. Fill in the state in which you	• • • • • • • • • • • • • • • • • • • •	Illinois	-po.				
		o. Fill in the number of people		8					
		, ,	•		<del>-</del>	\$124,816.00			
	16c. Fill in the median family income for your state and size of household  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.								
17.	Но	low do the lines compare?							
	17a	7a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).							
	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.								
Part	3:	Calculate Your Commit	ment Period Under	11 U.S.C. §1325	(b)(4)				
18.	Cop	by your total average month	ly income from line 11.			\$2,668.45			
19.					e is not filing with you, and you contend that calculating the of your spouse's income, copy the amount from line 13.				
	19a	a. If the marital adjustment doe	es not apply, fill in 0 on li	те 19а.	· · · · · · · · · · · · · · · · · · ·	-\$0.00			
	19b. Subtract line 19a from line 18.								
20.	. Calculate your current monthly income for the year. Follow these steps:								
	20a	. Copy line 19b.			www.cx.com.com.com.com.com.com.com.com.com.com	\$2,668.45			
		Multiply by 12 (the number	of months in a year).			x 12			
	20b	o. The result is your current mo	onthly income for the yea	r for this part of the	form.	\$32,021.40			
	20c. Copy the median family income for your state and size of household from line 16c.								
21.	Hov	dow do the lines compare?							
	図	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.							
		Line 20b is more than or equ 4, <i>The commitment period is</i>		erwise ordered by th	ne court, on the top of page 1 of this form, check box				
Part	4: 5	Sign Below							
		By signing here, I declare und	der penalty of perjury that	the information on	this statement and in any attachments is true and correct.				
			Mostos						
		X /s/ Timika Pipes Signature of Debtor 1	F. Tip	la :	Signature of Debtor 2				
		Date 10/2/2017			Date				
		MM/DD/YYYY			MM/DD/YYYY				
		If you checked 17a, do NOT in the state of t			39 of that form, copy your current monthly income from line	14			